SCHEDULE B (FEC Form 3) TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one) 17
Any information copied from such Reports and Statements or for commercial purposes, other than using the name ar		person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) LARSON FOR CONGRESS	,	
Full Name (Last, First, Middle Initial) A. FRIENDS OF LOIS CAPPS	Date of Disbursement	
Mailing Address PO BOX 23940		09 12 2011
City State SANTA BARBARA CA Purpose of Disbursement Contribution Candidate Name	Zip Code 93121 Category	Amount of Each Disbursement this Period 1000.00 Transaction ID: SB21.45996
State: CA District: 23	Type Type Type	
Full Name (Last, First, Middle Initial) KURT SCHRADER FOR CONGRESS Mailing Address 607 N. Main St Suite 240		Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
CityStateOregon CityOR	Zip Code 97045	Amount of Each Disbursement this Period
Purpose of Disbursement Contribution Candidate Name Category/		1000.00 Transaction ID : SB21.45787
	For: 2012 ary Seneral r (specify)	
Full Name (Last, First, Middle Initial) PRICE FOR CONGRESS		Date of Disbursement
Mailing Address P.O. Box 1986		09 222011
City State Zip Code Raleigh NC 27602 Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 2000.00
Candidate Name DAVID PRICE Office Sought: Senate President State: NC District: 04 Disbursement Prima Othe		Transaction ID : SB21.45789
SUBTOTAL of Disbursements This Page (optional)		4000.00

TOTAL This Period (last page this line number only).....